

Request for State Letter of Support
[Use one form per grant application]

Applicant (Name of government entity or non-profit)_____

Coalition members (if applicable)_____

Type of Grant:

☐ Assessment – Site Specific,

☐ Assessment – Community Wide,

☐ Cleanup

☐ Revolving Loan Fund

If Cleanup or Site Specific Assessment, Name and address of property

Contamination: ☐ Petroleum,

☐ Hazardous Waste

☐ Combination

Brief narrative description of proposed project_____

Name and title of official (for letter from state)_____

Mailing address of official (for letter from state)_____

Grantwriter contact information:

Name of individual preparing the grant_____

Mailing address (if different from official)_____

Email Address_____

Phone_____

Fax_____